

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: 163193.01
Application Number : 09/886,771		Filed : June 21, 2001
For : CLUSTERING OF DATABASES HAVING MIXED DATA ATTRIBUTES		
Art Unit : 2165	Examiner : Hassan Mahmoudi	

This is a request under the provisions of 37 CFR 1. 136(a) to extend the period for filing a reply in the above identified application.

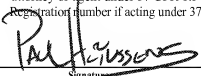
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$55	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$215	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$490	\$ <u>1020.00</u>
<input type="checkbox"/> Four months (37 CFR 1. 17(a)(4))	\$1590	\$765	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1040	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27.
☐ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 50-0463. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
☒ attorney or agent of record. Registration Number 47,648.
☐ attorney or agent under 37 CFR 1.34.
 Registration number if acting under 37 CFR 1.34 _____.



 Paul B. Heynssens
 Typed or printed name

May 15, 2006

 Date
 (425) 707-3913

 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted